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FILING BATE

FIRST NAMED INVENTOR

ATTORNEY DOCKET NO.

(Signature)

(Depositor's name)

CONFIRMATION NO.

APPLICATION NO. 10/689,343

10/20/2003

Katsumi Ochiai

FS.20124US0A

2902

TITLE OF INVENTION: SHIFT DEVICE FOR MARINE TRANSMISSION

APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
	<u> </u>	\$1400			\$1700	05/02/2005
nonprovisional	NO			\$300	\$1700	03/02/2003
EXAMINER		ART UNIT		CLASS-SUBCLASS]	
OLSON, LARS A		3617		440-084000		
CFR 1.363). Change of correspor Address form PTO/SB/ "Fee Address" indic: PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AN	ce address or indication of "F ndence address (or Change of 122) attached. ation (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO E as an assignee is identified b	Correspondence ation form e of a Customer BE PRINTED ON T	(1) the na or agents (2) the na registered 2 registered listed, no	nting on the patent front page, litmes of up to 3 registered pater OR, alternatively, me of a single firm (having as a lattorney or agent) and the named patent attorneys or agents. If name will be printed. T (print or type) Dear on the patent. If an assignt for filing an assignment.	a member a les of up to no name is lesson a lesson a member a lesson a les lesson a les	ON & BEAR LLP
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